Revision: 0, April 9, 2002 SWRC Quality Project Plan for:

Conducting RCRA Self Assessments in Support of Appendix F Performance Measure 1.2.a – Environmental Performance

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Revision Log

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1.0 PURPOSE

This Quality Project Plan (QPP) states the responsibilities and describes the process by which the Los Alamos National Laboratory's Solid Waste Regulatory Compliance Group, SWRC, will conduct RCRA self assessments in support of UC Contract Appendix F Performance Measure 1.2.a, Environmental Performance.

2.0 SCOPE

This QPP is a mandatory document and shall be implemented by all SWRC participants when conducting RCRA self-assessments. **Note:** Subcontractors performing work under SWRC's quality program will follow this QPP for conducting RCRA self-assessments.

3.0 REFERENCES

SWRC personnel using this procedure should become familiar with the contents of the following documents to properly implement this QPP.

- 3.1 Integrated Safety Management Description Document, LAUR-98-2837, Rev. 3.1 at http://int.lanl.gov/safety/pdf/desc_doc.pdf
- 3.2 Quality Management Plan for the Hazardous & Solid Waste Group (ESH-19) at http://www.esh.lanl.gov/~esh19/19QMP.pdf
- 3.3 ESH-19, Hazardous & Solid Waste Group Safe Work Practices Work Authorization for Pre-Audits, Audits, and Assessments at http://www.esh.lanl.gov/pub/doc/esh19/swp/Audits.doc
- 3.4 SWRC, "Safety Procedure Audits, Tours, Inspections, and Walkarounds" located at http://www.esh.lanl.gov/pub/doc/esh19/swp/Sptour.doc

NOTE: Group names in referenced document titles will be updated during the next review cycle.

4.0 DEFINITIONS

4.1 Corrective Action — The process of correcting compliance deficiencies.

- 4.2 Corrective Action Report A document used to report deficiencies and the corrective action(s) (e.g., required remediation, investigation, identification of cause, and actions to preclude recurrence), as applicable.
- 4.3 Inspection a visit by SWRC personnel to an individual waste accumulation or storage area with a specific site ID (i.e., <90 day, Satellite Accumulation Area, Universal Waste Area, or TSD) for the purpose of inspecting the handling and management of waste for compliance with State and federal hazardous waste management regulations.
- 4.4 RCRA Resource Conservation and Recovery Act
- 4.5 RCRA self-assessment The process of inspecting waste management activities to evaluate compliance with the RCRA and applicable permit conditions
- 4.6 Repeat Observation Observed non-compliance or deficiency at the same location that is the same as that from a previous inspection.
- 4.7 Self-Assessment See RCRA Self-Assessment.
- 4.8 Waste Accumulation or Storage Area location with a specific site ID (i.e., <90 day, Satellite Accumulation Area, Universal Waste Area or TSD) and locations outside of designated waste storage areas where waste or suspected waste (e.g., chemicals or radioactive waste with a hazardous component with no identified owner) is found.

5.0 RESPONSIBLE PERSONNEL

The following personnel are responsible for activities identified in this procedure.

- 5.1 SWRC Group Leader
- 5.2 SWRC Team Leaders
- 5.3 SWRC Personnel
- 5.4 SWRC Subcontractors
- 5.5 SWRC Students

6.0 PROCEDURE

Note: SWRC personnel may produce paper copies of this procedure printed from the controlled-document electronic file located at

http://www.esh.lanl.gov/~esh19/programs/assessments/QP-

<u>RCRASelfAssessment.PDF</u> However, it is their responsibility to ensure that they are trained to and using the current version of this procedure. The author may be

contacted if text is unclear. Contact the SWRC Document Control Coordinator if the author cannot be located.

6.1 Initiate a self-assessment - Schedule and Entry

- 6.1.1 An organization is selected based on the self-assessment schedule. Each organization is generally assessed two times per year.
- 6.1.2 After the organization is selected, contact is made and the schedule confirmed with the selected organization's waste management coordinator. The WMC is responsible for notifying all other appropriate personnel (e.g., Facility Manager, Group Leaders & Division Directors, waste generators).
- 6.1.3 SWRC will make two attempts at entry to an area to conduct a self-assessment. If SWRC is denied entry to an area a written notice will be sent to the appropriate Division Director, with copies to the ESH Division Director, WMC, FM, and appropriate Group Leader, stating the specific circumstances, the location, date and time of refusal, and other pertinent information.

6.2 Health, Safety, and Security

- 6.2.1 WMCs, FM personnel, and SWRC personnel are jointly responsible for ensuring that SWRC inspectors are aware of potential threats to health and safety and all site entry and training requirements.
- 6.2.1 SWRC personnel must be accompanied by a site representative while conducting self-assessments and will observe all institutional and site-specific safety and security protocols.
- 6.2.3 A stop-work condition exists when continuing work would result in imminent danger or other significant hazard to the health or safety of workers, the public, or the environment. See LIR 401-10-01.1, Stop Work and Restart, at http://labreg.lanl.gov/pdfs/ops/01 operations/lir4011001.pdf

6.3 On-site Inspection Process

6.3.1 To ensure quality and consistency SWRC will conduct each inspection in accordance with a checklist of State, federal, and Laboratory requirements. See section 11.0 Attachments.

- 6.3.2 SWRC personnel will visit each waste accumulation or storage area and may question on-site personnel regarding their waste management practices or may ask to see relevant documentation including but not limited to waste characterization; waste generating process; waste shipping, personnel training; permits; emergency or contingency plans; and inspection records.
- 6.3.3 All observations will be verbally communicated to the WMC at the time of discovery and when possible, appropriate corrective actions recommended. Copies of the completed checklists are not automatically provided to the organization being inspected but will be available upon request. See Section 7.2 Reporting.
- 6.3.4 Photos may be taken for certain repeat findings or, with approval of the WMC, for training purposes.
- 6.3.4 SWRC personnel will conduct a closeout briefing if requested.

6.4 Contested findings

6.4.1 Organizations may contest findings within five days of the date of the self-assessment by providing supporting information to SWRC. SWRC personnel will evaluate the information provided and notify the customer of their decision.

6.5 Corrective Action

- 6.5.1 Within 30 days of the self-assessment the inspected organization shall submit a written notification to SWRC stating which findings were corrected, how they were corrected, and the date they were corrected; or, an action plan and schedule for implementation.
- 6.5.2 If SWRC does not receive notification of corrective action within 30 days a reminder email is sent to the WMC. If after two weeks corrective actions have still not been documented the appropriate manager is notified.

7.0 RECORD KEEPING, REPORTING, AND DATA ACCESSIBILITY

7.1 Records

7.1.1 Hard Copy or Paper Records

- 7.1.1.1 Completed self-assessment checklists will be kept on file at the SWRC Group Office for one year. Self-assessment checklists for the current year are maintained at SWRC. Checklists older than one year may be transferred to the ESH Division Document Archives.
- 7.1.1.2 Correspondence between SWRC and other Laboratory personnel regarding self-assessments for the current year is maintained in the SWRC Group Office. Correspondence older than one year may be transferred to the ESH Division Document Archives.
- 7.1.1.3 Laboratory personnel may request copies of their self-assessment records at any time.
- 7.1.1.4 External (to the Lab) requests for copies of self-assessment records, data, or correspondence must be approved by the SWRC Group Leader and Laboratory Counsel.
- 7.1.1.3 Photos will be maintained with related correspondence or data and controlled in a similar fashion.

7.1.2 Electronic Records

- 7.1.2.1 Results of self-assessments (from the checklists) are entered into the Hazardous Waste Self-Assessment database, generally within 24 hours of completing the self-assessment. Data quality is ensured by checking each electronic record against the hard copy. The database is located at http://eshdb.lanl.gov/cgi-bin/esh19/esh19 dbsummary?table=HWTS SASHA
- 7.1.2.2 Data integrity and security is maintained in accordance with procedures and requirements documented in the Laboratory's "Cyber Security Handbook" located at http://int.lanl.gov/security/cyber/handbook.shtml
- 7.1.2.3 Laboratory personnel can access the Hazardous Waste Self-Assessment database from onsite, via the SWRC Web Site at http://www.esh.lanl.gov/~esh19/ No offsite access is provided.
- 7.1.2.4 As a result of a verbal agreement between the Laboratory and the New Mexico Environment Department, personnel from the NMED will be granted approval to review self-assessment data while they are onsite.
- 7.1.2.5 Digital photos will be protected in a similar fashion to other electronic documents but will not be posted or accessible on the web site or in the database.

7.2 Reporting

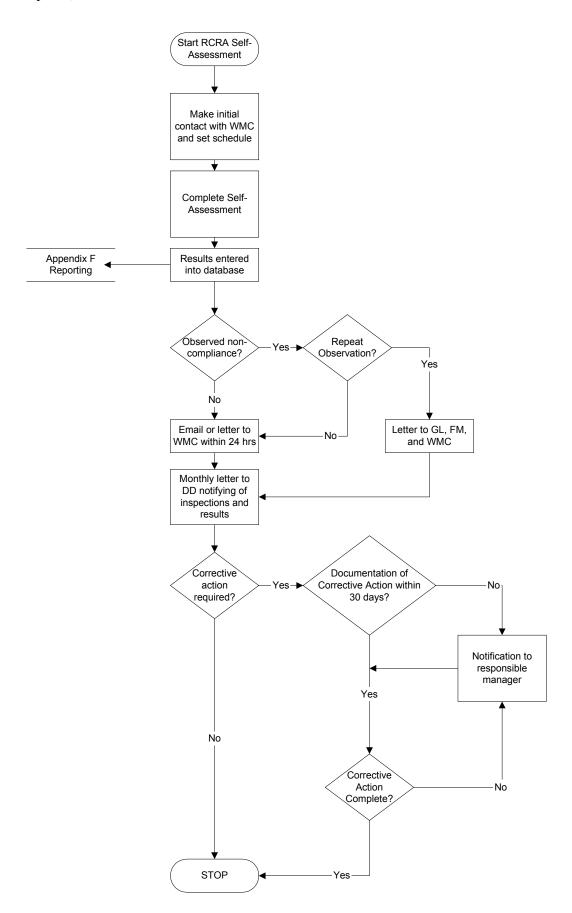
- 7.2.1 For first-time observations Generally within 24 hours of completion of the self-assessment WMCs will receive written (email or letter) notification of observations with recommended corrective actions when appropriate.
- 7.2.2 For repeat observations Within 24 hours a letter or email will be sent to the appropriate Group Leader, WMC, and FM notifying them of the repeat observations.
- 7.2.3 Division Directors are notified via automated e-mail on a monthly basis (the 15th of each month) of waste management areas in their division that were inspected and of their Division's performance.
- 7.2.4 Self-assessment data is reported on an annual, quarterly, and monthly basis to the ESH Division Director, the Associate Director for Operations, and the DOE OLASO as part of the UC Contract Appendix F measures 1.2.a Environmental Performance.
- 7.2.5 Additional reporting may be requested by NNSA, DOE, UC, or LANL managers and is subject to approval by the ESH Division Director.

8.0 TRAINING

- 8.1 SWRC personnel using this QP are trained by reading the procedure.
- 8.2 SWRC Personnel conducting self-assessments must be approved via the "SWRC, Hazardous & Solid Waste Group Safe Work Practices Work Authorization for Pre-Audits, Audits, and Assessments" process. Additionally, SWRC personnel conducting self-assessments shall have completed all training as specified by the SWRC Safe Work Practices Worker Authorization system and Hazard Control Plans
- 8.3 SWRC personnel shall ensure the training is documented in the Laboratory's Employee Development System training database.
- 8.4 The SWRC Group Leader shall monitor the proper implementation of this procedure and ensure that relevant team members have completed all applicable training.

9.0 PROCESS IMPROVEMENT AND CHANGES

- 9.1 Changes to this procedure or inspection checklists that are necessitated by changes in State or federal regulations, NNSA/DOE directives, or UC/LANL requirements or policies will be accompanied by immediate notice to WMCs and implemented immediately.
- 9.2 This procedure will be reviewed annually for process improvement opportunities. Stakeholder input shall be solicited and all input will be addressed through a formal comment resolution process.
- 9.3 Process Flow Diagram



10.0 AUTHOR

10.1 Tony Grieggs, Solid Waste Regulatory Compliance

11.0 ATTACHMENTS

11.1 Inspection Checklists

11.1.1 SAA Checklist

http://www.esh.lanl.gov/pub/doc/esh19/assessments/saaselfinsp.pdf

11.1.2 < 90 Day Checklist

http://www.esh.lanl.gov/pub/doc/esh19/assessments/rcracheck.pdf

11.1.3 Universal Waste Checklist

http://www.esh.lanl.gov/pub/doc/esh19/assessments/rcracheck.pdf

11.1.4 TSD Checklist

http://www.esh.lanl.gov/pub/doc/esh19/assessments/tsd.pdf